

AMENDED **2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 329063

1. Entity Name

HOLMES STAMP COMPANY

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

01 JUL 17 PM 3:25

Principal Place of Business

Mailing Address

1670 SAN MARCO BLVD.

P.O. Box 5274

JACKSONVILLE FL 32207

2. Principal Place of Business

3. Mailing Address

1670 SAN MARCO BLVD P.O. Box 5274

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

JACKSONVILLE FL

JACKSONVILLE FL

4. FEI Number

59-1208640

Applied For

Not Applicable

Zip

Country

Zip

Country

32207

USA

32247-5274

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBERT W. CROFT, JR
 1670 SAN MARCO BLVD.
 JACKSONVILLE, FL 32207

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Robert W. Croft

ROBERT W. CROFT JR

7-13-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PO
 ROBERT W. CROFT JR
 1670 SAN MARCO BLVD.
 JACKSONVILLE FL 32207 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 600004494286--4
 -07/24/01--01096--005
 *****61.25 *****61.25 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 S
 BRYAN C. CROFT
 1670 SAN MARCO BLVD.
 JACKSONVILLE FL 32207 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 BRYAN C. CROFT
 1670 SAN MARCO BLVD.
 JACKSONVILLE FL 32207 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 S
 OWEN H. HOLMES III
 1670 SAN MARCO BLVD
 JACKSONVILLE FL 32207 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 T
 EILEEN D. CROFT
 1670 SAN MARCO BLVD.
 JACKSONVILLE FL 32207 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Robert W. Croft Jr - ROBERT CROFT JR

7-13-01

904-396-2291

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)